

# PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No. **PCT/EP 2005 / 0 0 2 1 9 0**

**(02 03. 2005)**  
International Filing Date

**0 2 MAR 2005**

**EUROPEAN PATENT OFFICE**  
**PCT INTERNATIONAL APPLICATION**  
Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) **SCB 904 PCT**

**Box No. I TITLE OF INVENTION**

**A PROCESS FOR THE SEMISYNTHESIS OF DESERPIDINE**

**Box No. II APPLICANT**

☐ This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

**INDENA S.p.A.**  
**Viale Ortles, 12**  
**20139 MILANO**  
**Italy**

Telephone No.

Facsimile No.

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:

**IT**

State (that is, country) of residence:

**IT**

This person is applicant for the purposes of:

☐ all designated States

☒ all designated States except the United States of America

☐ the United States of America only

☐ the States indicated in the Supplemental Box

**Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)**

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

**FONTANA, Gabriele**  
**c/o INDENA S.p.A.**  
**Viale Ortles, 12**  
**20139 MILANO**  
**Italy**

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box is marked, do not fill in below.)

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☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

**Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

☒ agent

☐ common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

**BIANCHETTI, Giuseppe; MINOJA, Fabrizio, BANFI, Paolo**  
**BIANCHETTI BRACCO MINOJA S.r.l.**  
**Via Plinio, 63**  
**20129 MILANO**  
**Italy**

Telephone No.

**+39.02.76021218**

Facsimile No.

**+39.02.783078**

Teleprinter No.

Agent's registration No. with the Office

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Sheet No. ...2...

**Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)***If none of the following sub-boxes is used, this sheet should not be included in the request.*

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

**BOMBARDELLI, Ezio**  
Via Gabetta, 13  
27027 GROPPELLO CAIROLI (PV)  
Italy

This person is:

- ☐ applicant only  
☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

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**SAMORI, Cristian**  
Via Tripoli, 49  
47100 FORLÌ  
(Italy)

This person is:

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☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

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**BALDELLI, Eleonora**  
Via Saliceto, 23  
40129 BOLOGNA  
(Italy)

This person is:

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☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

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**GUERRINI, Andrea**  
C/o ISOF  
Via P. Gobetti, 101  
40129 BOLOGNA  
(Italy)

This person is:

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☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

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Sheet No. ...3...

**Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)***If none of the following sub-boxes is used, this sheet should not be included in the request.*

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BATTAGLIA, Arturo  
C/o ISOF  
Via P. Gobetti, 101  
40129 BOLOGNA  
(Italy)

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DANIELI, Bruno  
Via S. Martino della Battaglia, 11/C  
20122 MILANO  
(Italy)

This person is:

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☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

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☐ inventor only (If this check-box is marked, do not fill in below.)

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Sheet No. 5

**Box No. IX CHECK LIST; LANGUAGE OF FILING**

This international application contains:

(a) in paper form, the following number of sheets:

request (including declaration sheets) : 5  
 description (excluding sequence listing and/or tables related thereto) : 11  
 claims : 3  
 abstract : 1  
 drawings :

Sub-total number of sheets : 20

sequence listing :  
tables related thereto :

(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below)

Total number of sheets : 20

(b) ☐ only in computer readable form (Section 801(a)(i))(i) ☐ sequence listing  
(ii) ☐ tables related thereto(c) ☐ also in computer readable form (Section 801(a)(ii))(i) ☐ sequence listing  
(ii) ☐ tables related thereto

Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the

☐ sequence listing: .....  
☐ tables related thereto: .....

(additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)

This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):

1. ☐ fee calculation sheet :  
 2. ☐ original separate power of attorney :  
 3. ☐ original general power of attorney :  
 4. ☐ copy of general power of attorney; reference number, if any: ..... :  
 5. ☐ statement explaining lack of signature :  
 6. ☐ priority document(s) identified in Box No. VI as item(s): ..... :  
 7. ☐ translation of international application into (language): ..... :  
 8. ☐ separate indications concerning deposited microorganism or other biological material :  
 9. ☐ sequence listing in computer readable form (indicate type and number of carriers)  
     (i) ☐ copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application) :  
     (ii) ☐ (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter :  
     (iii) ☐ together with relevant statement as to the identity of the copy or copies with the sequence listing mentioned in left column :  
 10. ☐ tables in computer readable form related to sequence listing (indicate type and number of carriers)  
     (i) ☐ copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application) :  
     (ii) ☐ (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater) :  
     (iii) ☐ together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column :  
 11. ☒ other (specify): Request for fax acknowledgement ..... 1

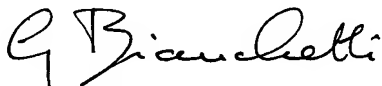
Figure of the drawings which should accompany the abstract:

Language of filing of the international application:

ENGLISH

**Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).



Prof. Giuseppe BIANCHETTI

1 March 2005 (01.03.2005)

For receiving Office use only

1. Date of actual receipt of the purported international application:

02 MAR 2005

(02.03.05)

3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:

4. Date of timely receipt of the required corrections under PCT Article 11(2):

5. International Searching Authority (if two or more are competent): ISA /

6. ☒ Transmittal of search copy delayed until search fee is paid

2. Drawings:

☐ received:☐ not received:

For International Bureau use only

Date of receipt of the record copy by the International Bureau: